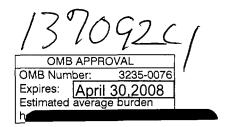


UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION





| Name of Offering | sisting of |
|--|----------------------------|
| Filing Under (Check box(es) that apply): | _ |
| A. BASIC IDENTIFICATION DATA I. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Authorizer Technologies, Inc. Address of Executive Offices Second Boulevard, Suite 5001, Palm Beach Gardens, FL 33410 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Gidifferent from Executive Offices) Brief Description of Business Developement of fingerprint Imaging technology based on ultrasound technology. Type of Business Organization Corporation Imited partnership, already formed other (please specify): Brief Description of Incorporation or Organization: SEP of Month Actual or Estimated Date of Incorporation or Organization: Thomas (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | 590,000 |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Authorizer Technologies, Inc. Address of Executive Offices | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Authorizer Technologies, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) Brief Description of Business Development of fingerprint imaging technology based on ultrasound technology. Type of Business Organization Corporation Imited partnership, already formed other (please specify): Brief Description of Business Development of fingerprint imaging technology based on ultrasound technology. Type of Business Organization Month Year Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | |
| Authorizer Technologies, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Securities of Principal Business Operations (if different from Executive Offices) (Number and Street, City, State, Zip Code) Telephone Number (Including Arc Set1.622.1650 Telephone Number (Including Arc Set1.622.1650) Telephone Number (Including Arc Set1.622.1650) Brief Description of Business Developement of fingerprint imaging technology based on ultrasound technology. Type of Business Organization Imited partnership, already formed other (please specify): Developement of Incorporation or Organization: O B O Actual Estimated SEP O O O O O O O O O O O O O O O O O O O | |
| Address of Executive Offices 3950 RCA Boulevard, Suite 5001, Palm Beach Gardens, FL 33410 Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business Developement of fingerprint imaging technology based on ultrasound technology. Type of Business Organization corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | |
| 3950 RCA Boulevard, Suite 5001, Palm Beach Gardens, FL 33410 Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business Developement of fingerprint Imaging technology based on ultrasound technology. Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | |
| Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business Developement of fingerprint imaging technology based on ultrasound technology. Type of Business Organization Corporation | a Code) |
| Brief Description of Business Developement of fingerprint imaging technology based on ultrasound technology. Type of Business Organization Corporation | |
| Type of Business Organization Corporation | ea Code) |
| Type of Business Organization Corporation | |
| Actual or Estimated Date of Incorporation or Organization: [O 8 O 4 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | |
| Actual or Estimated Date of Incorporation or Organization: [O 8 O 4 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | ESSE |
| Actual or Estimated Date of Incorporation or Organization: [O 8 O 4 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | |
| Actual or Estimated Date of Incorporation or Organization: [O 8 O 4 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | 6 mac |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | |
| CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | 120N |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | |
| Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. | |
| 7 Ta(0). | or 15 U.S.C. |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U. and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after which it is due, on the date it was mailed by United States registered or certified mail to that address. | |
| Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. | |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed copy or bear typed or printed signatures. | gned must be |
| Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Arnot be filed with the SEC. | |
| Filing Fee: There is no federal filing fee. | |
| State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that h ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper a accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitution notice and must be completed. | where sales mount shall |
| ÄTTENTION ———— | |
| Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictate filing of a federal notice. | |

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

SEC 1972 (6-02)

| 2. Enter the information re | equested for the fol | | | ENTIF | ICATION DATA | | | | aran da da garan da da da santa |
|--|----------------------|--------|--|----------|-----------------------|---------|-------------|----------|------------------------------------|
| • Each promoter of t | - | | | vithin t | he past five years; | | | | |
| <u>-</u> | | | - | | | of. 109 | % or more o | f a clas | s of equity securities of the is |
| | | | • | | rate general and man | | | | |
| Each general and n | | • | | 00.60 | 8 | | p | Pur | p, |
| - Duen general and h | | | | | | | | | |
| Check Box(es) that Apply: | Promoter | V | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | | | | | | | |
| Johnson, Theodore M. | | | | | | | | | |
| Business or Residence Addre clo Authorizer Technologi | | | | 1 | n Beach Gardens, | FL 3 | 3410 | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | Ø | Executive Officer | Ø | Director | | General and/or Managing Partner |
| Full Name (Last name first, i | f individual) | | | | | | | | |
| Davis, James E. | | | | | | | | | |
| Business or Residence Addre | ess (Number and | Street | , City, State, Zip C | ode) | | | | | |
| lo Authorizer Technologie | es, Inc., 3950 RC | A Boul | evard, Suite 500° | i, Palm | n Beach Gardens, F | L 33 | 410 | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, i Mansfield, Stephen A. | f individual) | | | | | | | | |
| Business or Residence Addre | ess (Number and | Street | , City, State, Zip C | ode) | | | | | |
| o Authorizer Technologie | es, Inc., 3950 RC | A Bou | levard, Suite 500 | 1, Pain | n Beach Gardens, I | FL 33 | 3410 | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, i | if individual) | | | | | | | | |
| Regniere, Louis | | | | ĺ | | | | | |
| Business or Residence Addre c/o Authorizer Technologi | | | , City, State, Zip C llevard, Suite 500 | | n Beach Gardens, | FL 3 | 3410 | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | | | | | |
| Business or Residence Addre | ess (Number and | Street | , City, State, Zip C | ode) | | | | | |
| | | | | | | | | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | | | | _ | |
| Business or Residence Addre | ess (Number and | Street | , City, State, Zip C | ode) | | | | | |
| Check Box(es) that Apply: | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | | | | | |
| Business or Residence Addre | ess (Number and | Street | , City, State, Zip C | ode) | | | | | |
| | (Use bla | nk she | et, or copy and us | additi | onal copies of this s | heet. 2 | as necessar | v) | |
| | (330 010 | | , py ama us | | • | , 1 | | ,, | |
| | | | | ∥ 2 օ | 1 4 | | | | |

•

| | | (INC.) | 100 | 17 | B. IN | NFORMA | TION ABOUT | OFFERD | NG | | 4 Day | | 4.0 |
|--|---|---|--|--|---|--|---|--|---|---------------------------|---------------------------------------|-----------|----------|
| 1. | Hac the | issuer sold | or does th | e iccuer ir | stand to sal | II to non | accredited in | vectors in | this offeri | na? | | Yes | No |
| 1. | Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | | | | | V | | | |
| 2. | What is the minimum investment that will be accepted from any individual? | | | | | | | | | §_N/A | | | |
| | Does the offering permit joint ownership of a single unit? | | | | | | | | | | Yes | No | |
| 3. | | | | | | i | | | | | | | |
| 4. | commiss If a pers or states | sion or sim on to be lis s, list the na | ilar remune ted is an ass ime of the b | ation for s ociated pe roker or de | olicitation rson or age aler. If mo | of purcha int of a bro ore than fi | een or will be sers in conne- oker or dealer ve (5) person at broker or d | ction with registered s to be list | sales of sec I with the S ed are asso | urities in t EC and/or | he offering. with a state | ; | |
| Full N/A | , | Last name | first, if indi | vidual) | | | | - | | | | | |
| | | Residence | Address (N | umber and | l Street, Ci | ty, State, | Zip Code) | | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | | | | | | | | | |
| Nan | ne of Ass | sociated Br | oker or Dea | ıler | | | | | | | | | |
| Stat | es in Wh | nich Person | Listed Has | Solicited | or Intends | to Solici | t Purchasers | | | | | | |
| | (Check | "All States | " or check | individual | States) | | | ····· | *************************************** | ••••••• | | Al | States |
| | AL | AK | AZ | AR | CA | CO | CT | DE | DC] | FL | GA | HI | ID |
| | IL | IN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO |
| | MT RI | NE SC | NV SD | NH TN | NJ TX | NM UT | NY VT | NC VA | ND WA | OH WV | OK WI | OR WY | PA PR |
| | | | | | | | | | | | | | |
| Full Name (Last name first, if individual) | | | | | | | | | | | | | |
| Bus | iness or | Residence | Address (N | lumber an | d Street, C | ity, State | Zip Code) | | | | | | |
| Nan | ne of Ass | sociated Br | oker or De | aler | | | | | | | | | |
| <u>C+-4</u> | | '.h D. | I to a d III. | C - 11 - 14 - 4 | T 4 I. | 4 0-11-1 | t Purchasers | | · | | | | |
| Stat | | | | | | | t Purchasers | | | ************** | | Al | l States |
| | AL | AK | ĀZ | ĀR | CA | CO | СТ | DE | DC | FĹ | GA | HI | ΠĎ |
| | IL | IN | | KS | KY | LA | ME | MD | MA | Ml | MN | MS | MO |
| | MT | NE | NV | NH | NJ | NM | NY | NC | ND | OH | OK | OR | PA |
| | RI | SC | SD | TN | TX | UT | VT | VA | WA | WV | WI | WY | PR |
| Full Name (Last name first, if individual) | | | | | | | | | | | | · <u></u> | |
| Bus | iness or | Residence | Address (1 | Number an | d Street, C | City, State | Zip Code) | | | | | | |
| | | | oker or De | aler | | | | | | ·· | | | |
| Nan | ne of Ass | sociated Bi | | | | | II | | | | | | |
| | | | Listed Has | Solicited | or Intends | to Solici | t Purchasers | | | | | | ···· |
| | es in Wh | nich Person | | | | | t Purchasers | ••••• | | | | ☐ Al | l States |
| | es in Wh (Check | nich Person "All States AK | a" or check | individual | States) | CO | CT | DE | DC | FL | GA | HI | ID |
| | es in Wh | nich Person | or check | individual ——— | States) | | | | | | | | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| | this box and indicate in the colu already exchanged. | | | | _ | |
|----|--|---|---|--|--|--|
| | Type of Security | | | | Aggregate Offering Price | Amount Already Sold |
| | Debt | ••••• | | ••••• | \$ <u>-0-</u> | \$_ - 0- |
| | Equity | | | | | \$ 3,562,238.09 |
| | . , | | ll . | ☐ Preferred | | |
| | Convertible Securities (including | ng warrants) | | _ | § 306,000 | _{\$} 254,445.71 |
| | Partnership Interests | | II. | | | \$ -0- |
| | Other (Specify | | li . | | <u>-</u> | s -0- |
| | Total | | 1. | | | \$ 3,816,683.80 |
| | Answer also in A | ppendix, Column 3, if | filing under l | JLOE. | | |
| 2. | Enter the number of accredited an offering and the aggregate dollar a the number of persons who have purchases on the total lines. Enter | mounts of their purcha purchased securities | ses. For offer and the aggr | ings under Rule 504, | , indicate | Aggregate Dollar Amount |
| | | | | | Investors | of Purchases |
| | Accredited Investors | | | | 22 | \$_3,816,683.80 |
| | Non accredited Investors | | | | | \$ |
| | non-accredited investors | •••••• | | | · · · · · · · · · · · · · · · · · · · | - * |
| | | | i | | | \$ |
| | Total (for filings unde | | i ji | | | |
| 3. | Total (for filings unde | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic | 4, if filing und r the informati ated, in the tw | er ULOE. on requested for all selve (12) months pri | securities or to the stion 1. | \$ |
| 3. | Total (for filings under Answer also in If this filing is for an offering under sold by the issuer, to date, in offer | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic | 4, if filing und r the informati ated, in the tw | er ULOE. on requested for all selve (12) months pri | securities or to the | \$ |
| 3. | Total (for filings under Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente rings of the types indic ring. Classify securiti | 4, if filing und r the informati ated, in the tw es by type list | er ULOE. on requested for all selve (12) months priced in Part C — Que | securities or to the stion 1. Type of Security | \$ Dollar Amount |
| 3. | Total (for filings under Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti | 4, if filing und r the informati ated, in the tw es by type list | er ULOE. on requested for all selve (12) months pried in Part C — Que | securities or to the stion 1. Type of Security N/A | \$ Dollar Amount Sold |
| 3. | Total (for filings under Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti | 4, if filing und r the informati ated, in the tw es by type list | ler ULOE. on requested for all selve (12) months priced in Part C — Que | Type of Security N/A N/A | \$ Dollar Amount Sold \$_ N/A |
| 3. | Total (for filings under Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti | 4, if filing und r the informati ated, in the tw es by type list | er ULOE. on requested for all selve (12) months pried in Part C — Que | Type of Security N/A N/A N/A | Dollar Amount Sold S N/A S N/A |
| 3. | Total (for filings under Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente rings of the types indic ring. Classify securiti expenses in connection le amounts relating solution | 4, if filing und r the informati ated, in the twes by type list with the issuely to organizagencies. If the | er ULOE. on requested for all selve (12) months priced in Part C — Question Part C — Question Part C — Question expenses of the e amount of an expense | Type of Security N/A N/A N/A N/A N/A on of the einsurer. | Dollar Amount Sold SN/A N/A N/A |
| 3. | Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti expenses in connection the amounts relating solution subject to future contir and check the box to the | t, if filing und r the informati ated, in the twes by type list with the issuely to organiz agencies. If the left of the es | er ULOE. on requested for all selve (12) months priced in Part C — Question Part C and distribution at a constitution of an expension expension expension. | Type of Security N/A N/A N/A N/A N/A on of the e insurer. nditure is | Dollar Amount Sold S N/A S N/A S N/A S N/A |
| 3. | Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 Regulation A Rule 504 Total Total a. Furnish a statement of all exsecurities in this offering. Exclud The information may be given as sonot known, furnish an estimate and | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti expenses in connection te amounts relating solution subject to future contir and check the box to the | t, if filing und r the informati ated, in the twees by type list with the issuely to organizagencies. If the eleft of the es | er ULOE. on requested for all selve (12) months pried in Part C — Question Part C attached at | Type of Security N/A N/A N/A N/A N/A on of the e insurer. nditure is | Dollar Amount Sold S N/A S N/A S N/A S N/A |
| 3. | Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 Regulation A Rule 504 Total Total a. Furnish a statement of all exsecurities in this offering. Exclud The information may be given as s not known, furnish an estimate an Transfer Agent's Fees | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti expenses in connection the amounts relating solution subject to future contir and check the box to the | t, if filing und r the informati ated, in the twes by type list with the issuely to organizagencies. If the eleft of the es | er ULOE. on requested for all selve (12) months priced in Part C — Question Part C and distribution at ion expenses of the eamount of an expension expenses in the expenses in | Type of Security N/A N/A N/A N/A N/A N/A On of the e insurer. nditure is | Dollar Amount Sold S N/A S N/A S N/A S N/A |
| 3. | Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 Regulation A Rule 504 Total Total a. Furnish a statement of all exsecurities in this offering. Exclud The information may be given as sonot known, furnish an estimate an Transfer Agent's Fees Printing and Engraving Costs | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti expenses in connection le amounts relating sol subject to future contir nd check the box to the | t, if filing und r the informati ated, in the twes by type list with the issuely to organizely to organizely to organizely to of the estable of the estable process. If the left of the estable process with the left of the estable process. | er ULOE. on requested for all selve (12) months prived in Part C — Question Part C — | Type of Security N/A N/A N/A N/A On of the e insurer. Inditure is | Dollar Amount Sold S. N/A S. N/A S. N/A S. N/A S. N/A |
| 3. | Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all exsecurities in this offering. Exclud The information may be given as sonot known, furnish an estimate an Transfer Agent's Fees Printing and Engraving Costs Legal Fees | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti expenses in connection the amounts relating solution to the continue continue to the continue cont | t, if filing und r the informati ated, in the twes by type list with the issuely to organizagencies. If the eleft of the es | er ULOE. on requested for all strelve (12) months priced in Part C — Question Part C and distribution at ion expenses of the e amount of an expensionate. | Securities or to the stion 1. Type of Security N/A N/A N/A N/A On of the e insurer. Inditure is | Dollar Amount Sold S N/A S N/A S N/A S N/A S N/A S N/A |
| 3. | Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all exsecurities in this offering. Exclud The information may be given as sonot known, furnish an estimate and Transfer Agent's Fees Printing and Engraving Coste Legal Fees Accounting Fees | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti expenses in connection le amounts relating sol subject to future contir nd check the box to the | t, if filing und r the informati ated, in the twes by type list with the issuely to organizagencies. If the eleft of the es | er ULOE. on requested for all selve (12) months prived in Part C — Question Part C and distribution expenses of the examount of an expensionate. | Type of Security N/A N/A N/A N/A On of the einsurer. Inditure is | Dollar Amount Sold \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A \$ S N/A |
| 3. | Total (for filings under Answer also in If this filing is for an offering under sold by the issuer, to date, in offer first sale of securities in this offer Type of Offering Rule 505 | er Rule 504 only) n Appendix, Column 4 r Rule 504 or 505, ente ings of the types indic ring. Classify securiti expenses in connection te amounts relating solution that check the box to the s | t, if filing und r the informati ated, in the twees by type list with the issuely to organizagencies. If the left of the es | er ULOE. on requested for all selve (12) months pried in Part C — Question Part C and distribution at the eamount of an expensionate. | Type of Security N/A | Dollar Amount Sold \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A \$ \$ N/A \$ \$ \$ 0,000 \$ \$ |

| C. DEFERING PRICE, NUMBER | OF INVESTORS, EXPENSES AND USE OF P | ROCEEDS | |
|--|---|---|---|
| b. Enter the difference between the aggregate offering p and total expenses furnished in response to Part C — Ques proceeds to the issuer." | tion 4.a This difference is the "adjusted gross | | \$ |
| . Indicate below the amount of the adjusted gross proceed each of the purposes shown. If the amount for any purcheck the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C— | rpose is not known, furnish an estimate and payments listed must equal the adjusted gross | | |
| | | Payments to Officers, Directors, & Affiliates | Payments to Others |
| Salaries and fees | Г | ¬ \$ | |
| Purchase of real estate | | | |
| Purchase, rental or leasing and installation of machines and equipment | ry |]\$ | |
| Construction or leasing of plant buildings and facilities | | | |
| Acquisition of other businesses (including the value of offering that may be used in exchange for the assets or | securities of another | et | |
| issuer pursuant to a merger) | i - | | |
| Repayment of indebtedness Working capital | = | | |
| Other (specify): | n e e e e e e e e e e e e e e e e e e e | | |
| Office (specify). | | | U \$ |
| | [| 7\$ | □\$ |
| Column Totals | li . | | |
| | | | 560,000 |
| Total Payments Listed (column totals added) | , | | |
| Description of the property of | FEDERAL SIGNATURE | | |
| e issuer has duly caused this notice to be signed by the unde nature constitutes an undertaking by the issuer to furnish to information furnished by the issuer to any non-accredite | to the U.S. Securities and Exchange Commiss | sion, upon writte | le 505, the followin n request of its staf |
| uer (Print or Type) Sign | nature | ate | |
| uthorizer Technologies, Inc. | August Stammer | August 16, 2006 | |

- ATTENTION -

Title of Signer (Print or Type)
Chief Executive Officer

Name of Signer (Print or Type)

Theodore M. Johnson

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)